

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT#
(Ethics Commission filers)

2 Total pages filed:

7

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

OSCAR
GONZÁLEZ

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

CITY CLERK DEPT.
05 APR 29 PM 1:47

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

☐ Change of Address

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

819 SIERRA, EL PASO, TX 79903

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(915)

506-2788

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR

FIRST

MI

NICKNAME

LAST

SUFFIX

LUCINDA
CUELLAR

7 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE);

APT / SUITE #;

CITY;

STATE;

ZIP CODE

6335 ARCE, EL PASO, TX 79932

8 CAMPAIGN
TREASURER
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(915)

584-7770

9 REPORT TYPE

☐

January 15

☐

30th day before election

☐

Runoff

☐

15th day after campaign treasurer appointment (officeholder only)

☐

July 15

☒

8th day before election

☐

Exceeded \$500 limit

☐

Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month

Day

Year

04 / 08 / 05

THROUGH

Month

Day

Year

04 / 27 / 05

11 ELECTION

ELECTION DATE

Month

Day

Year

05 / 07 / 05

ELECTION TYPE

☐ Primary

☐ Runoff

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

N/A

13 OFFICE SOUGHT (if known)

CITY REPRESENTATIVE, DIST. #2

14 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --

Name

N/A

Address / PO Box; Apt / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2



CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

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15 C/OH NAME

OSCAR GONZALEZ

16 ACCOUNT # (Ethics Commission filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

-- This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. --

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

N/A

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

1930.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$

1755.13

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$

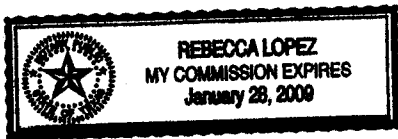
16.19

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$

19 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Oscar Gonzalez, this the 29th day of April, 2005, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

CITY CLERK DEPT.
05 APR 29 PM 1:47 3

The **INSTRUCTION GUIDE** explains how to complete this form.

1 Total pages: Schedule A: 3

2 FILER NAME

OSCAR GONZALEZ

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

6 Contributor address; City; State; Zip Code

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# _____)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Oscar González

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Attachment for Schedule A Political Contributions other than Pledges or Loans

<u>Contributor/Address</u>	<u>Amount</u>	<u>Date</u>
Sandra A. Gomez 12436 Tierra Limon El Paso, TX 79938	20.00	04-12-05
Jeanette Martinez 8405 Baylor El Paso, TX 79907	20.00	04-12-05
Alan Serna 595 Cora Place El Paso, TX 79915	100.00	04-13-05
Rebecca Serna 595 Cora Place El Paso, TX 79915	100.00	04-13-05
Lupe Camacho 12294 Roberta Lynne El Paso, TX 79936	50.00	04-15-05
Estela Jimenez 12037 David Forti El Paso, TX 79936	20.00	04-15-05
Daisy Gutierrez 3708 Deer Grass El Paso, TX 79936	20.00	04-15-05
Leticia Flores 9401 Sorbonne El Paso, TX 79907	25.00	04-15-05
Estela Morales 12050 Ben Proctor El Paso, TX 79936	25.00	04-15-05
Linebarger Goggan Blair & Sampson, LLP P.O. Box 17428, Austin 78760	500.00	04-19-05
Anatasha R. Vance 3120 Piedmont Dr. El Paso, TX 79902	50.00	04-21-05

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PAGE 1

<u>Contributor/Address</u>	<u>Amount</u>	<u>Date</u>
Veronica L. Velazquez 930 Aqua Caliente El Paso, TX 79912	100.00	04-26-05
Mary Barnard 221 Silverwood El Paso, TX 79922	100.00	04-26-05

IN-KIND CONTRIBUTIONS

Louis Merlin 3230 Asford # E San Diego, CA 92108	800.00	Legal-size color mailer 04-27-05
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TOTAL CAMPAIGN CONTRIBUTIONS \$1930.00

POLITICAL EXPENDITURES**SCHEDULE F**

CITY CLERK DEPT.

The INSTRUCTION GUIDE explains how to complete this form.

05 APR 29 PM 1:42
Total pages Schedule F: 12**2 FILER NAME**

OSCAR GONZALEZ

3 ACCOUNT # (Ethics Commission filers)**4 Date****5 Payee name****7 Amount**
(\$)**6 Payee address;** City; State; Zip Code**8 Purpose of payment** (See instructions regarding type of information required.)**9** ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount
(\$)

attached

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount
(\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

Oscar González

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05 APR 29 PM 1:48

Attachment for Schedule F Political Expenditures

<u>Payee Name/Address</u>	<u>Amount</u>	<u>Purpose</u>	<u>Date</u>
Kwik Copy 4310 Montana Ave. El Paso, TX 79903	303.65	Post cards & fliers	04-15-05
H&H Mailing Service 9020 Mayflower Ave. El Paso, TX 79925	701.66	District mailer	04-15-05
Wells Fargo Bank 6175 Gateway West Blvd. El Paso, TX 79925	7.00	Return item fee	04-26-05
H&H Mailing Service 9020 Mayflower Ave. El Paso, TX 79925	742.82	District mailer	04-27-05
TOTAL EXPENDITURES	\$1755.13		